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Alcimedes

Yet another legal high has raised its head tentatively above the parapet of the UK's pubs and clubs. The exotically-named "Ivory Wave" is sold as "soothing bath salts" but contains the hallucinogenic compound MDPV (Methylenedioxypyrovalerone). MDPV acts as a Noradrenergic Reuptake Inhibitor, and is said to have approximately four times the stimulant potency of methylphenidate ("Ritalin."). At least one death has been attributed to Ivory Wave, whereby a young man "tombstoned" himself into the sea off the Isle of Wight; in addition, there have been several reported medical admissions to Emergency Departments throughout the UK. Alcimedes waits with interest to see the response from the Government and the Advisory Council on the Misuse of Drugs.

It is also not clear how it will replace other legal highs "on the street." Off the record, Alcimedes was informed that, in tests, 8 out of 10 Khat owners preferred it.

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The words "temple" and "temporal" relate to the side of the head, but their origins derive from the Latin word *tempus*, meaning time. The temple is one of the first parts of the body to show the effects of time, with grey hair, crow's feet and a receding hairline.

Despite this very interesting piece of anatomical trivia, Alcimedes has found it to be of only limited assistance when conducting Age Assessments on detainees. These unfortunate individuals are usually male, have often travelled thousands of miles in atrocious conditions and are frequently vulnerable due to educational and language barriers. Although they often claim to be 16 years old or younger, their hopeless hairlines, thinning thatches and furrowed faces often imply that they are older than the doctor conducting the assessment.

The new coalition Government in the UK proposed in the Queen's Speech in May 2010 that there will be an end to the detention of under-18's who are seeking asylum. However, a recent case that has attracted much media attention is that of Mr Rabar Hamad, from Wigan, who arrived in the UK in 2008 from Northern Iraq and claimed to be 14 years old. Interestingly, the local

authorities have now rejected his claim to be a minor and have ruled that he appears to be at least 20 years old. An independent doctor had previously ruled him to be between 13 and 16 years. Wigan Council has therefore removed funding from his care and has referred him to the UK Borders Agency for deportation from the UK. Alcimedes notes that the cost to the local council for his education and social care was approximately £4000 per week, and wonders whether this change of approach may reflect the tightening of financial belts across the UK.

In the meantime, Mr Hamad has absconded from his care-home. It remains unclear if he packed a razor with him, or indeed if he actually needed one.

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For centuries, farmers have tried numerous techniques to battle their way against weeds. However, it seems that many farmers have now had a change of heart and are more than willing to try cultivating certain forms of "weed." An ACPO report ("UK National Problem Profile: Commercial Cultivation of Cannabis") released in mid August suggests that there has been a boom in the number of Cannabis Farms in the UK, with nearly 7000 illegal farms and factories uncovered in 2009–2010. The majority of farmers are between the ages of 18 and 35. Although cannabis is mainly imported to the UK from overseas, the report suggests that if the rate of development of these farms continues, the UK could become an exporter of cannabis for the first time in its history.

Alcimedes wonders whether this possible source of revenue for the UK economy could be used in the fight against drugs?

Reference

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The outgoing President of the Royal College of Physicians, Professor Sir Ian Gilmore, has donned his large Wellington boots and waded into the muddy debate on drug legislation. In his final Presidential e-mail to over 25,000 RCP members, and in subsequent appearances on various media outlets, he has called for debate on the current legislation of illicit drugs. Sir Ian has argued that there has been little progress made in tackling the fight against illicit drugs over the past 40 years and that this has had a significant cost to society in terms of crime, health and family breakdown. However, there are also contradictory quotes attributed to Sir Ian, as to whether he is calling for illicit drugs to be legalised, or whether he merely wants an open and mature debate on a subject that is infiltrating many aspects of modern life.

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The National Policing Improvement Agency (NPIA) and British Transport Police (BTP) have launched an innovative approach to closing the files on 20 unidentified bodies found on or near Britain's railway networks over the past 35 years. In a cold case review into these fatalities, Leeds-based facial imaging expert Sharon McDonagh has drawn portraits of each of the individuals. The gallery and persons' details are available for inspection at the BTP website http://www.btp.presscentre.com/

There is a certain irony in knowing that the NPIA has been involved in such a worthwhile project: in July 2010, the Home Secretary announced that the NPIA will be gradually phased out.

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The Home Office's "Test on Arrest" scheme was introduced in three police forces in December 2005 as part of the Drugs Act 2005. It was extended to a further fourteen forces three months later. The idea of detecting illicit drugs by salivary testing and diverting drug users to Drug Intervention Programmes is highly commendable and is now being modified by the UK Government in its fight against drug driving.

Following a statement from Road Safety Minister Mike Denning, it appears that the introduction of "Drugalyser" instruments for road-side and custody testing is imminent, with a complete roll-out intended across the UK by 2012.

This scheme raises the issue of distinguishing between qualitative and quantitative drug measurements. Salivary testing may detect the illicit drug, but it does not imply that the drug is impairing the driver's ability to drive. The most commonly used illicit drug in the UK is cannabis, which can be detected in blood for up to twelve days and in urine for several weeks after its last ingestion: however, it may not be impairing its user. It therefore seems likely that there will still be a requirement for the Forensic Physician to establish "whether a person has a condition, which might be due to drink or drugs" by performing Field Impairment Tests where drug driving is suspected. Alcimedes wonders whether this policy will result in an increased number of legal challenges to the Road Traffic Act and produce an increase in the workload of Forensic Physicians?

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